

# **DECLARATION**

## **INVENTORSHIP IDENTIFICATION**

As a below named inventor, I hereby declare that my residence, mailing address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

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SPECIFICATION IDENTIFICATION					
the specification of wh		ATION IDENTITION TO A			
. 🔽	ttached hereto.				
(b) was	s filed on, as [	Serial No			
	and was amended on _ (if a	pplicable).			
(c) was described and claimed in PCT International Application No filed on					
and was amended on (if applicable).					
AC	KNOWLEDGMENT OF RE	VIEW OF PAPERS AND D	OUTY OF CANDOR	₹	
I hereby sta	te that I have reviewed and	understand the contents of	f the above-identifie	ed specification,	
including the claims	as amended by any amend	ment referred to above.			
. I acknowled	dge the duty to disclose infor	mation, which is material to	o patentability as de	efined in 37,	
Code of Federal Re	gulations, § 1.56.				
	(Prior Foreign/Pct Ap	S UNDER 35 U.S.C. § 119 oplication(S) Filed Within 1 esign) Prior To This Applic	2 Months		
I hereby cla	aim foreign priority benefits	under Title 35, United Sta	ites Code, § 119(a	)-(d) or 365(b) of	
any foreign applicat	ion(s) for patent or inventor's	s certificate(s) or 365(a) of	any PCT internation	onal application(s)	
which designated a	at least one country other th	an the United States of A	America, listed belo	ow and have also	
identified below an	ny foreign application(s) for	patent or inventor's cer	tificate(s) or any	PCT international	
application(s) having	g a filing date before that of t	the application(s) of which	priority is claimed.		
Application Number	Country or PCT	Date Of Filing	Priority not	Certified Copy	
		(Day, Month, Year)	Claimed	Attached?	
				☐ YESNO ☐	



### CLAIM FOR BENEFIT OF PRIOR U.S. PROVISIONAL APPLICATION(S) UNDER 35 U.S.C. § 119(e)

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States provisional application(s) listed below:

Provisional Application Number	Filing Date

### CLAIM FOR BENEFIT OF EARLIER US/PCT APPLICATION(S) UNDER 35 U.S.C. 120

(All Foreign Application(S), *If Any*, Filed More Than 12 Months (6 Months For Design) Prior To This U.S. Application)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) or 365(c) PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application(s) in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37, Code of Federal Regulations, § 1.56, which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application.

U.S Parent	PCT Parent	Date Of Filing	Parent Patent
Application No.	Application No.	(Day, <b>Month,</b> Year)	No. (If applicable)

### **DECLARATION**

I hereby declare that my presentation of this paper constitutes a certification under 37 C.F.R § 10.18, which provides, in part, that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and that further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful statements may jeopardize the validity of the application and any patent issuing therefrom

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# SIGNATURE(S)

Mark		Kirkpatrick		
(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
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Inventor's signature				
Date	Country of Citizenship			
Residence				
Mailing Address:				
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(GIVEN NAME)	(MIDDLE INITIAL OR NAME)	FAMILY (OR LAST NAME)		
Inventor's signature	·			
Date	Country of Citizenship			
Residence				
Mailing Address:				
L_ Signatu	ure by administrator(trix), or legal representat	tive for deceased or incapacitated inventor.		
Num	ber of pages added			
Sign	ature for inventor who refuses to sign or can	not be reached by person authorized under		
37 C	FR 1.47. Number of pages added			
Adde	Added page for signature by one joint inventor on behalf of deceased inventor(s) where legal			
repre	representative cannot be appointed in time. (37 CFR 1.47) Number of pages added			
Autho	Authorization of attorney(s) to accept and follow instructions from representative.			
This declarat	ion ends with this page.			